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Testimony of Planned Parenthood of Southern New England
in support of raised House Bill 6616 *An Act Concerning Expansion of HUSKY Health Benefits to Those Ineligible Due to Immigration Status*
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Senator Lesser, Representative Gilchrest and honorable members of the Human Services Committee, my name is Gretchen Raffa, Vice President of Public Policy, Advocacy and Organizing at Planned Parenthood of Southern New England (PPSNE) testifying in support of raised House Bill 6616 *An Act Concerning Expansion of HUSKY Health Benefits to Those Ineligible Due to Immigration Status*. As the state's largest provider of family planning and sexual and reproductive health care to over 50,000 patients last year at 14 health centers across the state, Planned Parenthood believes all people should have access to quality, affordable, and compassionate health care as a basic human right — regardless of who you are, where you live, your income, if you have health insurance or your immigration status.

Over the past two legislative sessions this committee and legislature took important action, providing access to HUSKY Health for undocumented immigrant children ages 0-12 years old and prenatal and postpartum care for undocumented immigrant pregnant people is making an impact yet there is more work to do to ensure every immigrant in our state who needs health care can access it. H.B. 6616 is a needed and necessary improvement to current law. This is critically important as it would ensure that children will not age out of coverage once they turn 13 years old and be left without healthcare. Although important progress was made last session and we are grateful for the legislators who voted in favor of the bill, many immigrants throughout our state are still unable to access health care through the third year of the pandemic. This is always unacceptable—and even more unfair and cruel as we reflect on the three-year anniversary of a global pandemic that has claimed so many lives and left so many people with lifelong health concerns.

H.B. 6616 is one way to address the health care coverage gap for children and that coverage can't stop at age 12. Eligibility restrictions on public and private insurance prohibit too many immigrant residents and families from obtaining coverage. Uninsured women often have inadequate access to care, get a lower standard of care when they are in the health system, and have poorer health outcomes.ⁱ Barriers to health care coverage, including preventive care, substantially impact immigrant women and families with low incomes contributing to poorer health outcomes for immigrants. Federal law already blocks many immigrants from accessing private and public health care coverage, and harsh immigration enforcement makes it difficult for communities to seek out health care or raise their families without fear. Currently, federal law prohibits undocumented immigrants, as well as many lawfully present immigrants, from enrolling in Medicaid or the Children's Health Insurance Program (CHIP). Federal law bans undocumented immigrants from purchasing affordable health insurance on the Marketplace, even with their own funds. About 60% of, non-U.S. citizen, low income immigrant women of reproductive age lack health insurance, which is more than twice the proportion of low-income U.S.-born women. Because many immigrant women can't access private or public health coverage, they are less likely than other U.S. born women to access lifesaving and essential preventive health care — such as Pap tests, annual exams, STD/STI screenings, and birth control.

People who are denied health coverage because of their immigration status depend on health care providers like Planned Parenthood who provide affordable, primary, and preventive health care. The reality for our patients is that they face systemic and structural barriers to accessing health care due to this country's legacy of systemic racism and discrimination. For many, including undocumented immigrants who are shut out of public and private health insurance coverage, cost is a significant barrier to getting the preventive care they need. Often the care received at Planned Parenthood is time-sensitive health care and delays in that care can lead to disease, infertilityⁱⁱ or unintended pregnancy. Expanding HUSKY coverage to all residents regardless of immigration status is a reproductive rights and justice issue.

Health care is a fundamental human right that should be guaranteed to all people in our state. Planned Parenthood will continue to fight for policies that protect the rights of all people to ensure our patients and communities have what they need to live healthy and self-determined lives. No one's health should be compromised, or health care access denied because of their immigration status. Expanding access to health care for all people in our state is the right thing to do and is popular among voters, the majority (57%) of who support expanding HUSKY to ALL undocumented immigrants.ⁱⁱⁱ We can, and we must continue to do better by expanding coverage beyond the current age limit for children. Investing in people's health care now will have long term public health benefits for all communities and we know the dire, human consequences of inaction. Also, savings to hospitals from reduced uncompensated care costs could amount to roughly \$63.3 million.^{iv} Again, we thank the committee for taking steps the past two sessions. We strongly urge the committee to support H.B. 6616 and take another important step forward in addressing health inequities in our state and bring us closer to achieving health care for all. Thank you for your time and consideration of this important legislation.

ⁱ Women's Health Insurance Coverage, Kaiser Family Foundation <https://www.kff.org/womens-health-policy/fact-sheet/womens-health-insurance-coverage/>

ⁱⁱ Centers for Disease Control and Prevention. "Chlamydia Fact Sheet" (April 12, 2022). <https://www.cdc.gov/std/chlamydia/stdfact-chlamydia.htm>

ⁱⁱⁱ Expanding Insurance Coverage to Undocumented Immigrants in Connecticut | RAND https://www.rand.org/pubs/research_reports/RRA1964-1.html

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